| SCHEDULE A (FEC Form 3X)   |  |                | Use separate schedule(s)           | FOR LINE NUMBER        | R: PAGE 155/215   |  |
|--|--|----------------|------------------------------------|------------------------|---|--|
| TEMIZED RECEIPTS   |  |                | or each category of the            | (check only one)       |   |  |
| •  |  |                | Detailed Summary Page              | X 11a 11b              | 11c   12<br>15   16   17  |  |
|  |  |                |                                    |                        |   |  |
| Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. |  |                |                                    |                        |   |  |
|  | NAME OF COMMITTEE (In Full)                                |                |                                    |                        |   |  |
| $\rangle$  | MetLife Inc. Employees Pol. Participatio                   | n Fund A       |                                    |                        |   |  |
| _  | Full Name (Last, First, Middle Initial)                    |                |                                    |                        |   |  |
| ۹.   | Leland C. Launer Jr.                                       |                |                                    | Date of Receipt        |   |  |
|  | Mailing Address 12 Welsh Lane                              |                |                                    | M M / D                |   |  |
|  | City   | State          | Zip Code                           | 09 2                   |   |  |
|  | New Vernon   | NJ             | 07976                              |                        | Transaction ID: A2006-1410072  Amount of Each Receipt this Period |  |
|  | FEC ID number of contributing                              |                |                                    | 7 III Saint of Edolf I | · · · · · · · · ·   |  |
|  | federal political committee.                               | C              |                                    |                        | 208.33  |  |
|  | Name of Employer<br>Metropolitan Life Insuran-             | yer Occupation |                                    | 7                      |   |  |
|  | ce Co  |                | ce President                       | 4                      |   |  |
|  | Receipt For: Primary General                               | Aggregate      | e Year-to-Date ▼                   | , [                    |   |  |
|  | Other (specify)  |                | 2424.99                            |                        |   |  |
|  |  |                |                                    |                        |   |  |
| 3.   | Full Name (Last, First, Middle Initial) Paul Leclair       | _              |                                    | Date of Receipt        |   |  |
|  | Mailing Address 108 Partridge Circle                       |                |                                    | M M / D                | D / Y Y Y Y Y   |  |
|  |  |                |                                    | 09 1                   | 2006  |  |
|  | City   | State          | Zip Code                           |                        | A2006-1365027   |  |
|  | Taunton  | MA             | 02780                              | Amount of Each         | Receipt this Period   |  |
|  | FEC ID number of contributing federal political committee. | С              |                                    |                        | 19.58   |  |
|  | ·  |                |                                    |                        |   |  |
|  | Name of Employer<br>Metropolitan Life Insuran-             | Occupation     |                                    |                        |   |  |
|  | ce Co<br>Receipt For:                                      |                | sident & Actuary<br>Year-to-Date ▼ | $\dashv$               |   |  |
|  | Primary General  | . iggi ogalo   |                                    | 1                      |   |  |
|  | Other (specify) ▼  |                | 332.86                             |                        |   |  |
|  |  |                |                                    | 1                      |   |  |
| Э.   | Full Name (Last, First, Middle Initial) Paul Leclair       |                |                                    | Date of Receipt        |   |  |
|  | Mailing Address 108 Partridge Circle                       |                |                                    | M M / D                |   |  |
|  |  |                |                                    | 09 2                   |   |  |
|  | City   | State<br>MA    | Zip Code                           |                        | A2006-1409699   |  |
|  | Taunton  EEC ID number of contributing                     |                | 02780                              | Amount of Each         | Receipt this Period   |  |
|  | FEC ID number of contributing federal political committee. | C              |                                    |                        | 19.58   |  |
|  | Name of Employer   | Occupation     | 1                                  | _                      |   |  |
|  | Metropolitan Life Insuran-<br>ce Co                        |                | sident & Actuary                   |                        |   |  |
|  | Receipt For:   | 1              | Year-to-Date ▼                     |                        |   |  |
|  | Primary General  |                | 352.44                             | 1                      |   |  |
|  | Other (specify) ▼  |                | 002.77                             |                        |   |  |
|  |  |                |                                    |                        |   |  |
| SUBTOTAL of Receipts This Page (optional)  |  |                |                                    |                        |   |  |
| TOTAL This Period (last page this line number only)  |  |                |                                    |                        |   |  |